

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AD	62861	3/29
O.I.P.E. CLASSIFIER	LW	32	4/3
FORMALITY REVIEW	S.S.	69134	5-23-60
RESPONSE FORMALITY REVIEW	"	"	7-31-2000

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	2/7/63
2	0
3	0
4	✓
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6	0
7	0
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If more than 150 claims or 10 actions  
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